

2006-07 Legislative Analysis

State and Local Partnerships

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Services to citizens of the Commonwealth are not only critical for the quality of life, but in some areas are rapidly becoming amongst the most costly expenditures for state and local governments. York County staff has identified the following areas as current legislative concerns. Based upon recent trends and experiences during previous sessions of the General Assembly, the following issues should be considered as the County prepares for the coming session:

I. Mental Health:

Behavioral Health Care must be accomplished through both a state-wide, Commonwealth operated system and an adequately funded community based system of care.

Issue: The Commonwealth should maintain, fully fund and continue to operate a Statewide Mental Health System, to include residential facilities for long-term care of adults and adolescents.

Issue: The Commonwealth should provide funding sufficient to allow Community Services Boards to adequately meet the charge of providing a community based system of care.

Issue: The absence of sufficient funding for community based care; prevention programs and adequate mental health inpatient treatment facilities has had a critical impact on the criminal justice system. By default, corrections facilities are becoming mental health treatment centers.

During recent years there has been a continuing trend toward reorganization and downsizing of the State Mental Health care system. It is important to recognize that such downsizing has both a service and financial impact on localities.

- ◆ The state presently pays for its institutions. After closing or significantly downsizing, there will no longer be any ability to hospitalize patients in a state facility. Localities should be very concerned about where those in need of psychiatric hospitalization will go in the future and who will be responsible for payments for that care. Additionally, current patients should not be released into the community without state funding sufficient to pay for service needs.
- ◆ All adolescent units have closed with the exception of a short-term (6 weeks) diagnostic and minimal stabilization facility. This leaves the ever-increasing numbers of very seriously disturbed children with no alternatives for residential care other than expensive private placements, usually cooperatively funded by state-local governments under the Comprehensive Services Act (CSA). In addition, there is an extremely high incidence of youth with mental health disorders in secure juvenile detention centers.

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- ◆ Left untreated, mental health disorders and substance abuse frequently result in behaviors that bring individuals to the attention of law enforcement agencies and the Courts. Disturbed adults and juveniles are being found in increasing numbers in corrections facilities rather than mental health facilities. Community Service Boards have no resources to assign to secure facilities for treatment. Local corrections staff are becoming mental health and substance abuse services deliverers. Local governments are increasingly funding treatment professionals within adult jails and in secure and other residential juvenile facilities.

Recommendations:

Some services are best run statewide. This is particularly true of a mental health system.

It is the responsibility of the Commonwealth to provide for behavioral health care in an appropriate mental health system not a corrections environment. The Commonwealth must assure the delivery of this care by operating a statewide system of inpatient treatment centers and by adequately funding a community based system of care.

The General Assembly should:

1. Maintain, fully fund and continue to operate a Statewide Mental Health System, to include inpatient treatment facilities for long-term care of adults and adolescents. As well, prevention services, care and coordination of after care should be expanded.
2. Provide funding sufficient to allow Community Services Boards to adequately meet the charge of providing a community based system of care.
3. Reinstate juvenile inpatient mental health and substance abuse treatment facilities.
4. Assure adequate access to inpatient care for the transfer of adult offenders from jails to mental health facilities.

II. Comprehensive Services Act (CSA)

In 1992, the General Assembly adopted the Comprehensive Services Act (CSA). This took funds used for services for seriously dysfunctional children and their families from various state agencies and combined them in a single revenue stream with a required local government match. The CSA has resulted in an increased administrative burden for localities with only the most minimal fiscal support from the state. Further, it has blurred lines of responsibility and fiscal accountability at the agency level, reducing the capacity to control costs. The difficulty in predicting necessary funding levels to support mandated services has creased significantly.

Recommendations:

The General Assembly should:

1. Maintain the distinction between mandated and non-mandated children to be served with CSA funds and keep service to non-mandated populations a local option.
2. Recognize the high cost of residential treatment that has resulted from the closing of state run mental health facilities and the transfer of portions of the costs to local governments under the CSA.
3. Recognize the intense administrative burdens on local governments that accompany the implementation of the CSA and increase the administrative reimbursement to localities.

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4. Remove the local match requirement for Medicaid that was imposed in 2000 in the CSA – in all other areas Medicaid is a state and federal funded program and the CSA is the only instance of required local government Medicaid match.

III. Juvenile Justice System:

Issue: *Reductions in funding to localities made by the 2002 General Assembly.*

The Virginia Juvenile Community Crime Control Act (VJCCCA) is the Commonwealth's funding stream for the State-Local Partnership that provides vital programs for juvenile offenders. This partnership provides options to secure detention or incarceration in a state juvenile corrections facility. The 2002 General Assembly reduced VJCCCA funding by 51%. These funds should be fully restored and indexed to 2006 dollars.

Issue: *Adequate funding for Juvenile Detention facilities and direct funding for on-site mental health and substance services.*

Secure juvenile detention centers are necessary for the public safety and are partnerships between the Commonwealth and local government. In recent years there has been significant shifting of the State's share of operations costs to the local partner. In addition, a larger number of offenders who would otherwise be in state corrections centers are remaining in local facilities through the State's increased emphasis on "community corrections" and further, an ever increasing number of incarcerated juveniles have mental health problems and should actually be in mental health facilities rather than detention centers.

Issue: *Reporting requirements for low level juvenile sex offenders.*

Recent legislation requiring adult sex offenders to register has also been applied to juveniles. Requiring low level juvenile sex offenders to register:

- Is contrary to the public policy on which the Commonwealth's juvenile justice system is predicated and which otherwise provides age limits and allows juveniles to have prospects for a reasonable future.
- Throws into question whether a juvenile can then attend school or even live with their families if siblings are children.

Recommendations:

The General Assembly should:

1. Increase the level of funding for secure detention centers
2. Support a distribution process through the Department of Juvenile Justice (DJJ) that would not rely solely on utilization but would provide equitable cost sharing for services delivered.
3. Provide a juvenile forensics unit.
4. Re-examine reporting requirements for low level juvenile sex offenders.

IV. Aging and Health:

Aging of the general population represents a significant challenge for both state and local governments.

Recommendations:

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The General Assembly should:

1. Assure that a state-wide plan for aging be developed.
2. Assure the establishment and implementation of comprehensive standards of care for increasingly important adult homes and assisted living facilities.
3. Recognize and prepare for the impact on the workforce that will occur with a potentially massive loss of employees to retirement over a relatively short period of time.

V. Affordable Housing

Affordable housing is a continuing and growing concern throughout the Commonwealth.

Recommendations:

The General Assembly should:

1. Recognize both in funding and in regulatory action, that affordability does not have a single solution but is driven by the cost of land, construction and money.
2. Support initiatives that provide opportunities for rental and homeownership and recognize that housing rehabilitation activities help keep citizens in homes they already own and are therefore directly related to affordability.
3. Continue support for programs offered through the Virginia Department of Housing and Community Development (VDH&CD) and the Virginia Housing development Authority (VHDA).
4. Explore creative methods of addressing affordability, such as a Homestead Exemption with a means test for non-elderly as well as senior citizens.

VI. Libraries, Arts, Parks and Recreation, Tourism and other partnerships

State support for a wide range of services that have traditionally been state and local partnerships has drastically declined during the past several decades. These elements certainly enhance the quality of life for citizens in the Commonwealth but also directly affect the ability to attract or retain business and industry. Further, Tourism not only supports an important industry in Virginia but also directly generates revenue streams which are used to offset the costs of various other services. Even as funding from our State partner has declined, regulatory requirements or administrative demands have increased substantially. The General Assembly should fully fund the state share of partnerships in all such areas.